FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F78375** **(5)**

1. Corporate Name

F.E.B.A., INC.

Principal Place of Business:

520 BRICKELL KEY, APT. 1811
MIAMI FL 33131

Mailing Address:

520 BRICKELL KEY, APT. 1811
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/30/1982**

3a. Date of Last Report: **06/17/1994**

2. Principal Place of Business
21

22 Suite, Apt. # or Rm.

23 City & State

24 Zip 25 County

2a. Mailing Address
26

27 Suite, Apt. # or Rm.

28 City & State

29 Zip 30 County

4. FEI Number: **65-0414292**

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FERNANDEZ, ELADIO
520 BRICKELL KEY, APT. 1811
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1005, and/or 1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
61 Title	PD	☐ Change ☐ Addition
62 Name	FERNANDEZ, ELADIO	
63 Street Address	520 BRICKELL KEY, #1811	
64 City, St, Zip	MIAMI FL	
61 Title	D	☐ Change ☐ Addition
62 Name	FERNANDEZ, MARIA T	
63 Street Address	520 BRICKELL KEY, #1811	
64 City, St, Zip	MIAMI FL 33131	
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address		
64 City, St, Zip		
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address		
64 City, St, Zip		
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address		
64 City, St, Zip		
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address		
64 City, St, Zip		

14. I/We hereby certify that the information supplied with this filing is true and accurate and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added by an attachment with an address.

SIGNATURE: Eladio Fernandez 4/25/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date

0130412 CP

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CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

DOCUMENT # F78639 (4)

FLORIDA FLAIR OF WINTER PARK, INC.

Principal Place of Business:
15 WEST YALE
ORLANDO FL 32804

Mailing Address:
15 WEST YALE
ORLANDO FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/29/1982

3a. Date of Last Report: 07/22/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

22 — 27

23 — 28

24 — 25 — 29 — 30

4. FEI Number: 59-2170095 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has taxable income as defined in s. 220.03(2) Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

NITSCHMANN, WALTRAUD M.
15 WEST YALE
ORLANDO FL 32804

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

PD
NITSCHMANN, WALTRAUD M.
15 WEST YALE
ORLANDO FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an arrow.

SIGNATURE: W. Nitschmann (W. NITSCHMANN) 5.8.95 (407-977-8)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0417300 FP